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Client Number: 26473 Matter Number: 04177 Client Name: CCF

Number of Pages: 12

## Message:

In re application of:  
Hazen, et al.

Examiner: Nolan, Patrick J.

Serial No: 10/039,753

Art Unit: 1644

Filed: January 2, 2002

Confirmation No.: 9142

For: MYELOPEROXIDASE, A RISK  
INDICATOR FOR CARDIOVASCULAR  
DISEASE

Attorney Docket No.: 26473/04177

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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/039,753	<b>RECEIVED CENTRAL FAX CENTER APR 07 2006</b>
	Filing Date	January 2, 2002	
	First Named Inventor	Stanley Hazen	
	Art Unit	1844	
	Examiner Name	Nolan, Patrick J.	
Total Number of Pages in This Submission	12	Attorney Docket Number	28473/04177

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Facsimile Cover Sheet
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Printed name	Kristin J. Frost	
Date	April 7, 2006	Reg. No. 50,627

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Date	April 7, 2006

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/038,783	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b> <b>APR 07 2006</b>
	Filing Date	January 2, 2002	
	First Named Inventor	Stanley Hazen	
	Art Unit	1644	
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I hereby certify that this AMENDMENT is being  
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**Attention: Dr. Patrick Nolan**

Typed or Printed name of person signing this certificate:  
Wendy A. Frick

**Signed:**

Wendy A. Frick

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# PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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**Serial No.: 10/039,753**

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**For: MYELOPEROXIDASE,  
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**Attorney Docket No.: 26473/04177**

**Mail Stop Amendment  
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## AMENDMENT

Dear Sir:

The following is responsive to the Office Action mailed March 10, 2006. Please amend the above-described application as follows:

**There are no amendments to the Specification.**

**Amendments to the Claims begin on page 2 of this paper.**

**Remarks begin on page 7 of this paper.**